

**EXHIBIT A**

**Post-Petition Invoices**



10510 Twin Lakes Parkway  
Charlotte, NC 28269-7658  
Tel: 800-825-1766 Fax: 704-948-5779

**Bill To:**  
Attn: Accounts Payable  
PIONEER HEALTH SERVICES INC  
110 PIONEER WAY  
MAGEE, MS 39111-5501

Invoice Number	510017680
Invoice Date	01-APR-2016
Transaction Type	Invoice
Amount Due	\$4,527.78

Make Checks Payable To "Aramark"

**Remit To:**

Aramark  
12483 COLLECTIONS CENTER DR  
CHICAGO, IL 60693

**Ship To:**

000003269-LACKEY MEM HOSP  
PIONEER HEALTH SERVICES INC  
LACKEY MEMORIAL HOSPITAL  
330 NORTH BROAD STREET  
FOREST, MS 39074

Payment Terms	Due Date	Customer PO	Customer Number
NET 30	01-MAY-2016		28061

Line No.	Description	Quantity	Amount	Total Amount
1	Healthcare Technologies Services	1	4,527.78	4,527.78

Comments:	Currency	USD
	Invoices Total	\$4,527.78
	Shipping / Handling	\$0.00
	Tax	\$0.00
	Total	\$4,527.78

Federal ID: ACTS







10510 Twin Lakes Parkway  
Charlotte, NC 28269-7658  
Tel: 800-825-1766 Fax: 704-948-5779

**Bill To:**  
Attn: Accounts Payable  
PIONEER HEALTH SERVICES INC  
110 PIONEER WAY  
MAGEE, MS 39111-5501

Invoice Number	HSC0077478
Invoice Date	27-APR-2016
Transaction Type	Invoice
Amount Due	\$13,046.43

Make Checks Payable To "Aramark"

**Remit To:**

Aramark  
12483 COLLECTIONS CENTER DR  
CHICAGO, IL 60693

**Ship To:**

000003269-PIONEER COM HOSP SCOTT  
PIONEER HEALTH SERVICES INC  
PIONEER COMMUNITY HOSPITAL OF SCOTT  
18797 ALBERTA STREET  
ONEIDA, TN 37841

Payment Terms	Due Date	Customer PO	Customer Number
NET 30	27-MAY-2016		28061

Line No.	Description	Quantity	Amount	Total Amount
1	Labor	1	3,531.50	3,531.50
2	OPS Labor	1	4,264.61	4,264.61
3	Part	1	332.80	332.80
4	OPS Part	1	1,404.85	1,404.85
5	Travel	1	1,470.00	1,470.00
6	OPS Travel	1	857.50	857.50

**Comments:**  
Invoices for Services as per attached report

Currency	USD
Invoices Total	\$11,861.26
Shipping / Handling	\$0.00
Tax	\$1,185.17
Total	\$13,046.43

Federal ID:

ACTS 1



10510 Twin Lakes Parkway  
Charlotte, NC 28269-7658  
Tel: 800-825-1786 Fax: 704-948-5779

**Bill To:**  
Attn: Accounts Payable  
PIONEER HEALTH SERVICES INC  
110 PIONEER WAY  
MAGEE, MS 39111-5501

Invoice Number	510017969
Invoice Date	01-MAY-2016
Transaction Type	Invoice
Amount Due	\$4,527.78

Make Checks Payable To "Aramark"

**Remit To:**

Aramark  
12483 COLLECTIONS CENTER DR  
CHICAGO, IL 60693

**Ship To:**

000003269-LACKEY MEM HOSP  
PIONEER HEALTH SERVICES INC  
LACKEY MEMORIAL HOSPITAL  
330 NORTH BROAD STREET  
FOREST, MS 39074

Payment Terms	Due Date	Customer PO	Customer Number
NET 30	31-MAY-2016		28061

Line No.	Description	Quantity	Amount	Total Amount
1	Healthcare Technologies Services	1	4,527.78	4,527.78

Comments:	Currency	USD
	Invoices Total	\$4,527.78
	Shipping / Handling	\$0.00
	Tax	\$0.00
	Total	\$4,527.78

Federal ID:

ACTS







10510 Twin Lakes Parkway  
Charlotte, NC 28269-7658  
Tel: 600-825-1786 Fax: 704-948-5779

**Bill To:**  
Attn: Accounts Payable  
PIONEER HEALTH SERVICES INC  
110 PIONEER WAY  
MAGEE, MS 39111-5501

Invoice Number	HSC0080657
Invoice Date	25-MAY-2016
Transaction Type	Invoice
Amount Due	\$1,150.00

Make Checks Payable To "Aramark"

**Remit To:**

Aramark  
12483 COLLECTIONS CENTER DR  
CHICAGO, IL 60693

**Ship To:**

000003269-LACKEY MEM HOSP  
PIONEER HEALTH SERVICES INC  
LACKEY MEMORIAL HOSPITAL  
330 NORTH BROAD STREET  
FOREST, MS 39074

Payment Terms	Due Date	Customer PO	Customer Number
NET 30	24-JUN-2016		28061

Line No.	Description	Quantity	Amount	Total Amount
1	OPS Labor	1	1,150.00	1,150.00

**Comments:**  
Invoices for Services as per attached report

Currency	USD
Invoices Total	\$1,150.00
Shipping / Handling	\$0.00
Tax	\$0.00
Total	\$1,150.00

Federal ID:

ACTS 1



10510 Twin Lakes Parkway  
Charlotte, NC 28269-7658  
Tel: 800-825-1766 Fax: 704-948-5779

**Bill To:**

Attn: Accounts Payable  
PIONEER HEALTH SERVICES INC  
110 PIONEER WAY  
MAGEE, MS 39111-5501

Invoice Number	HSC0080658
Invoice Date	25-MAY-2016
Transaction Type	Invoice
Amount Due	\$2,801.40

Make Checks Payable To "Aramark"

**Remit To:**

Aramark  
12483 COLLECTIONS CENTER DR  
CHICAGO, IL 60693

**Ship To:**

000003269-PIONEER COM HOSP SCOTT  
PIONEER HEALTH SERVICES INC  
PIONEER COMMUNITY HOSPITAL OF SCOTT  
18797 ALBERTA STREET  
ONEIDA, TN 37841

Payment Terms	Due Date	Customer PO	Customer Number
NET 30	24-JUN-2016		28061

Line No.	Description	Quantity	Amount	Total Amount
1	Labor	1	178.50	178.50
2	OPS Labor	1	2,366.42	2,366.42

**Comments:**

Invoices for Services as per attached report

Currency	USD
Invoices Total	\$2,544.92
Shipping / Handling	\$0.00
Tax	\$256.48
Total	\$2,801.40

Federal ID:

ACTS 1



10510 Twin Lakes Parkway  
Charlotte, NC 28269-7658  
Tel: 800-825-1786 Fax: 704-946-5779

**Bill To:**  
Attn: Accounts Payable  
PIONEER HEALTH SERVICES INC  
110 PIONEER WAY  
MAGEE, MS 39111-5501

Invoice Number	510018046
Invoice Date	01-JUN-2016
Transaction Type	Invoice
Amount Due	\$4,690.78

Make Checks Payable To "Aramark"

**Remit To:**

Aramark  
12483 COLLECTIONS CENTER DR  
CHICAGO, IL 60693

**Ship To:**

000003269-LACKEY MEM HOSP  
PIONEER HEALTH SERVICES INC  
LACKEY MEMORIAL HOSPITAL  
330 NORTH BROAD STREET  
FOREST, MS 39074

Payment Terms	Due Date	Customer PO	Customer Number
NET 30	01-JUL-2016		28061

Line No.	Description	Quantity	Amount	Total Amount
1	Healthcare Technologies Services	1	4,690.78	4,690.78

Comments:	Currency	USD
	Invoices Total	\$4,690.78
	Shipping / Handling	\$0.00
	Tax	\$0.00
	Total	\$4,690.78

Federal ID: ACTS





10510 Twin Lakes Parkway  
Charlotte, NC 28269-7558  
Tel: 800-825-1786 Fax: 704-948-5779

**Bill To:**  
Attn: Accounts Payable  
PIONEER HEALTH SERVICES INC  
110 PIONEER WAY  
MAGEE, MS 39111-5501

Invoice Number	510018048
Invoice Date	01-JUN-2016
Transaction Type	Invoice
Amount Due	\$5,019.13

Make Checks Payable To "Aramark"

**Remit To:**

Aramark  
12483 COLLECTIONS CENTER DR  
CHICAGO, IL 60693

**Ship To:**

000003269-PIONEER COM HOSP NEWTON  
PIONEER HEALTH SERVICES INC  
PIONEER COMMUNITY HOSPITAL OF NEWTO  
9421 EASTSIDE DRIVE EXTENSION  
NEWTON, MS 39345

Payment Terms	Due Date	Customer PO	Customer Number
NET 30	01-JUL-2016		28061

Line No.	Description	Quantity	Amount	Total Amount
1	Healthcare Technologies Services	1	4,690.78	4,690.78

Comments:	Currency	USD
	Invoices Total	\$4,690.78
	Shipping / Handling	\$0.00
	Tax	\$328.35
	Total	\$5,019.13

Federal ID:

ACTS





10510 Twin Lakes Parkway  
Charlotte, NC 28269-7658  
Tel: 800-825-1766 Fax: 704-948-5779

**Bill To:**  
Attn: Accounts Payable  
PIONEER HEALTH SERVICES INC  
110 PIONEER WAY  
MAGEE, MS 39111-5501

Invoice Number	HSC0084994
Invoice Date	29-JUN-2016
Transaction Type	Invoice
Amount Due	\$535.33

Make Checks Payable To "Aramark"

**Remit To:**

Aramark  
12483 COLLECTIONS CENTER DR  
CHICAGO, IL 60693

**Ship To:**

000003269-PIONEER COM HOSP SCOTT  
PIONEER HEALTH SERVICES INC  
PIONEER COMMUNITY HOSPITAL OF SCOTT  
18797 ALBERTA STREET  
ONEIDA, TN 37841

Payment Terms	Due Date	Customer PO	Customer Number
NET 30	29-JUL-2016		28061

Line No.	Description	Quantity	Amount	Total Amount
1	Other	1	490.00	490.00

Comments:  
Invoices for Services as per attached report

Currency	USD
Invoices Total	\$490.00
Shipping / Handling	\$0.00
Tax	\$45.33
Total	\$535.33

Federal ID:

ACTS 1



10510 Twin Lakes Parkway  
Charlotte, NC 28269-7658  
Tel: 800-825-1786 Fax: 704-948-5779

**Bill To:**  
Attn: Accounts Payable  
PIONEER HEALTH SERVICES INC  
110 PIONEER WAY  
MAGEE, MS 39111-5501

Invoice Number	HSC0088222
Invoice Date	27-JUL-2016
Transaction Type	Invoice
Amount Due	\$425.00

Make Checks Payable To "Aramark"

**Remit To:**

Aramark  
12483 COLLECTIONS CENTER DR  
CHICAGO, IL 60693

**Ship To:**

000003269-LACKEY MEM HOSP  
PIONEER HEALTH SERVICES INC  
LACKEY MEMORIAL HOSPITAL  
330 NORTH BROAD STREET  
FOREST, MS 39074

Payment Terms	Due Date	Customer PO	Customer Number
NET 30	26-AUG-2016		28061

Line No.	Description	Quantity	Amount	Total Amount
1	OPS Labor	1	425.00	425.00

**Comments:**  
Invoices for Services as per attached report

<b>Currency</b>	USD
<b>Invoices Total</b>	\$425.00
<b>Shipping / Handling</b>	\$0.00
<b>Tax</b>	\$0.00
<b>Total</b>	\$425.00

Federal ID:

ACTS 1



10510 Twin Lakes Parkway  
Charlotte, NC 28269-7658  
Tel: 800-825-1786 Fax: 704-948-5779

**Bill To:**  
Attn: Accounts Payable  
PIONEER HEALTH SERVICES INC  
110 PIONEER WAY  
MAGEE, MS 39111-5501

Invoice Number	HSC0088223
Invoice Date	27-JUL-2016
Transaction Type	Invoice
Amount Due	\$160.50

Make Checks Payable To "Aramark"

**Remit To:**

Aramark  
12483 COLLECTIONS CENTER DR  
CHICAGO, IL 60693

**Ship To:**

000003269-PIONEER COM HOSP ABERDEEN  
PIONEER HEALTH SERVICES INC  
PIONEER COMMUNITY HOSPITAL OF ABERD  
400 SOUTH CHESTNUT STREET  
ABERDEEN, MS 39730

Payment Terms	Due Date	Customer PO	Customer Number
NET 30	26-AUG-2016		28061

Line No.	Description	Quantity	Amount	Total Amount
1	OPS Other	1	150.00	150.00

Comments:  
Invoices for Services as per attached report

Currency	USD
Invoices Total	\$150.00
Shipping / Handling	\$0.00
Tax	\$10.50
Total	\$160.50

Federal ID: ACTS 1







10510 Twin Lakes Parkway  
Charlotte, NC 28269-7658  
Tel: 800-825-1786 Fax: 704-948-5779

**Bill To:**  
Attn: Accounts Payable  
PIONEER HEALTH SERVICES INC  
110 PIONEER WAY  
MAGEE, MS 39111-5501

Invoice Number	100278638
Invoice Date	29-JUN-2016
Transaction Type	Credit Memo
Amount Due	-\$1,079.54

Make Checks Payable To "Aramark"

**Remit To:**

Aramark  
12483 COLLECTIONS CENTER DR  
CHICAGO, IL 60693

**Ship To:**

000003269-LACKEY MEM HOSP  
PIONEER HEALTH SERVICES INC  
LACKEY MEMORIAL HOSPITAL  
330 NORTH BROAD STREET  
FOREST, MS 39074

Payment Terms	Due Date	Customer PO	Customer Number
	29-JUN-2016		28061

Line No.	Description	Quantity	Amount	Total Amount
1	Termed 6/23/16 - Credit 7 days	1	-1,079.54	-1,079.54

Comments:	Currency	USD
	Invoices Total	-\$1,079.54
	Shipping / Handling	\$0.00
	Tax	\$0.00
	Total	-\$1,079.54

Federal ID:

ACTS